



Docket No. 036806.00432

DECLARATION UNDER 37 CFR §1.63

As attorney of record for the Assignee, Omnicare, Inc., I hereby declare that:

The name, residence, post office address and citizenship of the inventor are as follows:

Name of Sole Inventor : Ralph F. Kalies
Residence : 5770 Kumbier Road, Picket, Wisconsin, 54964
Citizenship : U.S.A.
Post Office Address : 5770 Kumbier Road, Picket, Wisconsin, 54964

I verily believe that Ralph F. Kalies is the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the invention entitled:

METHOD FOR PROCESSING AND ORGANIZING PHARMACY DATA

described and claimed

 in the attached specification;
X in the specification filed October 8, 2003,
as U.S. Application No. 10/681,955,
and as amended _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as filed and as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

PRIORITY CLAIM

I hereby claim foreign priority benefits under title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application(s) for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Priority Claimed

number	Country	Day/Mo/Yr	Yes	No
number	Country	Day/Mo/Yr	Yes	No

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

60/416,810	October 8, 2002
Application No.	Filing Date
Application No.	Filing Date

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
Application Serial No.	Filing Date	Status

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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Date: 3-30-2004



Michael A. Forhan
Reg. No. 46,706
Attorney of Record of Assignee, Omnicare, Inc.

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